

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69007	10/5/90
O.I.P.E. CLASSIFIER	12	62000	10/8
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1			8/12/90
2			10/6
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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